

## FORM COMP.A.A.

(See Rules 253(c), 234(5)(iii), 254(2) 255(1)(iv) )

## REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS

Sr.			
1.	Name of the Police Station	:-	Talasari Police Station
2.	Cr/No.Tar/No. SEC No.	:-	116/2021 IPC-304(A),279.337.338.427 M.V. Act-184 etc
3.	Date Time and place of the accidents	:-	05/06/2021 at Time 06.00 AM Mumbai Ahamadabad Highway, Gujarat Lenth, Kajali Tarn, Kajali Goa, Tel- Talasari, Dist-Palghar
4.	Name of the Injured/deceased	:-	<b>Deceased-</b> Vinod Motilala Yadav age- 30 Year, At- Aatmaj Motilal Yadav Manderpur Bhaisaha, Sardah Aajamgad UttarPradesh
5.	Name of the Hospital to whiche he/she was removed	:-	Rural Hospital Talsari
6.	Number of vehicle and types of the vehicle	:-	MH.46.AF.5172 Kantenr
7.	Name and address of the driver of the vehicle with particulars driving license of the said driver driver and the address of the issuing Authority of the said Driving License, the number of the Badge in case of Publice Service Vehicle and the address of the issuing Authority of the saidBadge?	:-	Vinod Motilala Yadav age- 30 Year, At- Aatmaj Motilal Yadav Manderpur Bhaisaha, Sardah Aajamgad UttarPradesh <b>Driving license-</b>
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	:-	Mohammad Naffez Memon
9.	Name and address of the Insurance company with whom the Vehicle was msured and the Divisional office of the said Insurancecompany?	:-	-
10.	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	:-	<b>Insuranc Police No:- -</b> <b>Validity:- -13/05/2022</b>
11.	Action teken if any and the result there of.	:-	Police pending

**NB:-** This form Should accompany with all the necessary document viz (i) FIR, (2) Panchnama, (3) Medical Certificate/Postmortum Report.

**Date:- 26.06.2021**

**INSPECTOR OF POLICE**  
**TALASARI POLICE STATION**